



Department \_\_\_\_\_  
Division \_\_\_\_\_  
Agency Contact \_\_\_\_\_ Phone \_\_\_\_\_  
Effective Date \_\_\_\_\_ (MM/DD/YYYY)

## Acceptance of Cash Custody Form

**Type of Fund:** Petty Cash Travel Change Other \_\_\_\_\_

**Type of Transaction:** Establish New Fund Increase Fund Decrease Fund Transfer Fund Close Fund  
Establishing a new fund or increasing a fund requires an approval letter stating the amount of the fund/increase and reason.

\_\_\_\_\_  
Custodian of Fund

Original Amount of Fund \_\_\_\_\_

\_\_\_\_\_  
Custodian Vendor Number (Assigned by Finance)

Increase/Decrease Amount \_\_\_\_\_

\_\_\_\_\_  
Office Address

\*\*Checking \_\_\_\_\_  
Account \_\_\_\_\_

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Indicate name of bank & bank account #

\_\_\_\_\_  
Former Custodian (Name)

\_\_\_\_\_  
State Treasurer Approval to Open Checking Account

\_\_\_\_\_  
Former Custodian Vendor Number

\_\_\_\_\_  
Department Head or Authorized Agent Signature

I agree to be responsible for and to maintain the fund in the amount shown above in accordance with the policies and procedures established by the Director of Finance

\_\_\_\_\_  
Custodian of Fund (Signature)

\_\_\_\_\_  
Date

### SUMMARY

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TO BE USED BY THE DIVISION OF FINANCE ONLY

\_\_\_\_\_  
Completed by

\_\_\_\_\_  
Date